



CERTIFICATE OF COMPLETION

The Physical Therapy Board of California (PTBC) must receive the Certificate of Completion with the application in an envelope sealed by the program. Failure to include the Certificate of Completion with the application will prohibit authorization to work as a license applicant.

This form is to be completed and signed by the College Registrar or Program Director of the degree-granting program to document graduation of a professional degree program and completion of a professional education including academic coursework and clinical internship pursuant to section 2650 of the business and professions code.

☐ Physical Therapist

☐ Physical Therapist Assistant

This certifies _____
FIRST NAME LAST NAME OTHER LAST NAMES USED

Completed all coursework and clinical practice on: _____
DATE

Graduated on: _____
DATE

From: _____
NAME OF DEGREE-GRANTING PROGRAM

Signed and the college seal affixed this _____ day of _____, _____.
MONTH YEAR

By _____
SIGNATURE OF REGISTRAR OR PROGRAM DIRECTOR

TYPE or PRINT your name

[SEAL]
AFFIX SCHOOL SEAL HERE